Book Reviews

Origins of a Prohibition

Abortion in America. The Origins and Evolution of National Policy, 1800–1900. JAMES C. MOHR. Oxford University Press, New York, 1978. xii, 332 pp. $12.50.

The past few years have witnessed an outpouring of studies, both scholarly and polemical, on the sexual and medical history of women in America. The attention is long overdue, but the risks involved in such undertakings are great. Not a few authors have stumbled over their own biases while writing on these politically and socially sensitive subjects. Thus it is gratifying to report that historian James C. Mohr, in a truly remarkable performance, never slips while exploring one of the most hazardous fields of all: abortion.

Mohr's clearly written, impressively researched account of abortion in 19th-century America comes full of historical surprises. Throughout much of the 19th century, he tells us, abortion served as a morally and socially acceptable means of birth control and seems to have played a major role in decreasing the number of births per American woman from 7.04 in 1800 to 3.56 in 1900. During some decades perhaps as many as one-third of all pregnancies ended in abortion. The prohibition of this practice during the latter part of the century resulted from medical, not religious, pressures and represented a departure from previous behavior.

Before the early 1820's abortion attracted little attention. Common law did not recognize the existence of human life before quickening (the first sign of fetal movement), and for every 25 or 30 live births there was only about one abortion. Those who sought to terminate their pregnancies seem to have been the unmarried and unfortunate, who found physicians willing to perform their services under the guise of treating for menstrual blockage or who did it themselves at home with the aid of a domestic manual and some juniper oil.

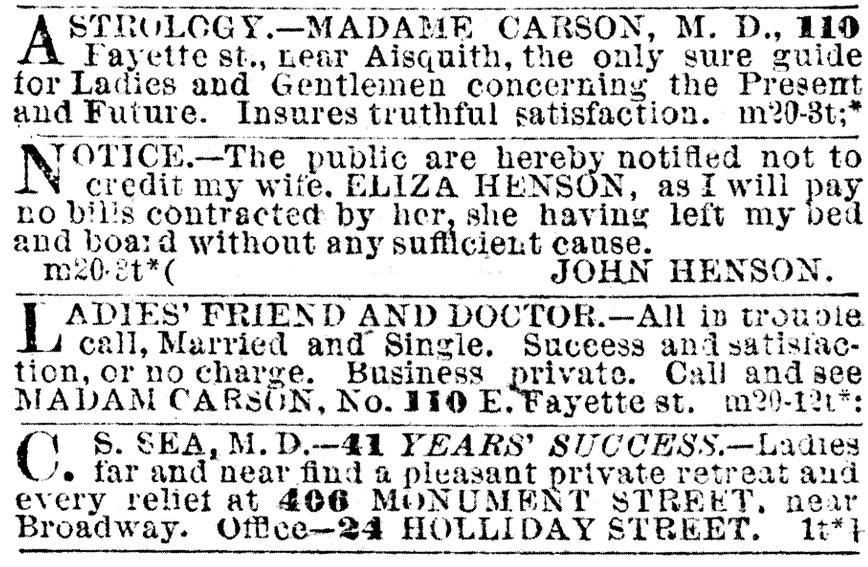
Beginning with Connecticut in 1821, the various states began passing laws to protect women from unqualified and unscrupulous abortionists. But the quickening doctrine continued in effect, and women themselves remained legally free to seek abortions. Not until the 1860's did the states begin enacting legislation outlawing all abortions for nontherapeutic reasons, whether before or after quickening, and making the women who sought them as liable as the abortionists. By the end of the century every state except one prohibited the practice.

In explaining these legal developments, Mohr focuses on two factors: the activities of the medical profession and a dramatic change in the social function of abortion. By the 1840's abortion was attracting nationwide attention. Clinics vied for customers, abortionists brazenly advertised for business, and newspapers titillated their readers with the lurid details of abortion-related trials. The number of abortions grew alarmingly. Some contemporary observers estimated that as many as two-thirds of all pregnancies ended in abortion, but Mohr favors a figure only half that high.

More disturbing than the increase itself was the population involved. Concerned writers noted that married women, often native-born white Protestants from the middle and upper classes, now far outnumbered the unwed in seeking abortions. Mohr's own survey of the medical literature confirms this impression. In 54 case histories reported between 1839 and 1880, the majority of women were wives and many already were mothers. They came from all regions, from the country as well as from the city. Only one was a Roman Catholic; another was nonwhite.

The motivations behind this change remain elusive. Before the appearance of reliable contraceptives, abortion provided a sure—and relatively safe—means of birth control. But this fact does not explain why middle-class American women suddenly demanded relief from the burdens of additional children. Feminists blamed the unbridled passion of thoughtless husbands, while male physicians accused American women of being self-indulgent, of trying to avoid the God-given responsibilities of motherhood. Unfortunately, there is little evidence of what female physicians thought, and Mohr deliberately avoids tackling the fundamental question of why American families wanted fewer children than ever before.

He does, however, suggest *how* Americans made the decision to abort. The little available evidence indicates that abortions often resulted from joint husband-wife decisions. Such choices, although reached reluctantly, seldom involved a moral dilemma. "As a con-



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"Commercial abortionists reacted in various ways to the pressures brought against them after the Civil War. This excerpt from the 'Personal' ads in the *Baltimore Sun* (March 20, 1867) suggests that Dr. Sea was content to remain under his medical cover, while Madame Carson, by running simultaneous ads, tried to establish an astrology ruse under which the public might still recognize her, should her more flagrant announcement be banned in the future." [From *Abortion in America*]

sequence of the quickening doctrine," writes Mohr, "the vast majority of American women during the middle decades of the nineteenth century . . . never had to face seriously the moral agonies so characteristic of the twentieth century's attitude toward the subject of abortion" (p. 74). Abortion may have been an unpleasant method of contraception, but it was not murder.

Surprisingly, the attack on this amoral view of abortion came from physicians rather than ministers, a fact that leads Mohr to treat the antiabortion crusade as a chapter in medical rather than religious history. While America's clergy stood quietly in their pulpits, physicians launched a campaign that proved "in the long run to be the single most important factor in altering the legal policies toward abortion in this country" (p. 157). According to Mohr, "regular" physicians attacked abortion for a variety of ethical, scientific, economic, and nativist reasons. Abortion violated the Hippocratic oath and rested on the scientifically untenable doctrine of quickening; but if "regular" physicians refused to perform abortions, they would lose patients to "irregular" practitioners with less science and fewer scruples. And if native-born WASP women continued to abort, the children of Catholic immigrants would soon flood the country.

Mohr's analysis of the physicians' role contains several flaws that mar an otherwise excellent work. First, although he correctly identifies regular physicians as leaders in the fight against abortion, he errs, I think, in overestimating their influence. During the middle decades of the 19th century the reputation and legal clout of the regular physicians reached their nadir. Patients turned in droves to other—irregular—practitioners, and state legislatures systematically stripped the orthodox doctors of their privileged position by repealing licensing laws. Given this climate, it seems unlikely that the opinions of regular physicians swayed legislators to the extent Mohr suggests. Besides, we know from Mohr himself that legislatures controlled by the enemies of regular medicine sometimes passed antiabortion laws.

Second, in stressing the allegiance of regular physicians to the Hippocratic oath, which did indeed forbid abortion, Mohr neglects to mention that the ancient oath also prohibited surgery, imposed secrecy upon those who took it, and obligated them to such quaint customs as teaching their instructors' children free. Obviously American physicians paid no attention to the oath, and probably not one in a thousand even knew what it said.

Third, Mohr's tendency to split the medical profession into antiabortion regulars and proabortion irregulars confuses and misleads. The confusion begins with his vague descriptions of regulars as having "had formal medical training either in the United States or in Great Britain or been apprenticed under a regular doctor" (p. 14), as being "committed to the forward-looking tenets of what would become scientific medicine" (p. 147), and as constituting a "medical sect" (p. 76). All these definitions, slightly modified, apply equally well to many irregulars, especially homeopaths and eclectics. Furthermore, Mohr is not always able to distinguish between regulars and irregulars (for example, he quotes James C. Jackson, a highly irregular hydropath, on the side of orthodoxy), and he erroneously speaks of the "elimination of most irregulars" (p. 239) at a time—the late 19th century—when sectarian practice reached its peak numerically.

In assessing motivation, Mohr accurately sees the antiabortion activities of regular physicians as stemming more from a desire to regulate the practice of medicine than from a commitment to the sanctity of human life. But he overlooks the similar aspirations of many irregulars. And his entire argument that there was a significant regular-irregular dichotomy over abortion collapses when we discover that the largest and most influential medical sect, the homeopaths, *opposed* abortion, as did many eclectics, representing the second largest medical sect in America.

On the basis of circumstantial (but convincing) evidence, Mohr concludes that the antiabortion campaign succeeded not only in outlawing abortion but in actually reducing its incidence. By the late 19th century observers were once again associating the practice "with the poor, the socially desperate, and the unwed—usually seduced or misled—girl" (p. 240). The expected increase in the national birth rate failed to occur, Mohr argues, partially because American couples turned to other methods of contraception.

In a brief but informative afterword Mohr skips three-quarters of a century to discuss the 1973 *Roe* decision, in which the Supreme Court effectively legalized abortions during the first two trimesters of pregnancy. Ironically, he notes, American physicians now joined the movement to liberalize the very policies their predecessors had promoted. The fascinating story of this 20th-century shift in attitudes toward abortion remains to be told, and we can only hope that the acclaim that has greeted Mohr's first book on abortion will inspire him to write a sequel.

RONALD L. NUMBERS
Department of the History of Medicine, University of Wisconsin, Madison 53706

Cosmological Theories

Planets and Planetarians. A History of Theories of the Origin of Planetary Systems. STANLEY L. JAKI. Halsted (Wiley), New York, 1978. vi, 266 pp. + plates. $16.95.

Whether or not one is convinced by the author's portrayal of scientists as conspiring to overlook unfavorable evidence while defending theories based on a priori assumptions, this review of theories about the origin of our planetary system succeeds in laying bare assumptions and in devastatingly criticizing scientists' errors, intentional or not.

He may have wished to find a conspiracy of silence among the Greeks, but Jaki realizes that not every interesting question is formulated at the outset. Greek astronomy generally did not extend beyond descriptions of the motions of planets, and as late as Kepler the only explanation sought for the arrangement of the planets was a geometrical harmony. Physics dealt solely with terrestrial matters, and the Aristotelian heaven was unchanging. Not until after the Copernican revolution, with the breakdown of the Aristotelian distinction between terrestrial and celestial regions and the union of astronomy and physics, did the development of the planetary systems become a question for science.

After devoting a chapter to these developments Jaki goes on to the more modern attempts to deal with the question.

Descartes's theory of vortices, with purely mechanical interactions, satisfied some adherents of the new mechanical philosophy. But it contained no role for God. Nor could it be connected with quantitative astronomical observations such as the elliptical orbits of planets, a phenomenon Descartes usually avoided mentioning. Physics had yet to find in quantitative exactness "a powerful antidote to mixing arbitrarily the interplay of various physical factors." E. J. Aiton's account of this theory and its fate, *The Vortex Theory of Planetary Motions*, is